

DEPARTMENT OF PUBLIC SAFETY COVER SHEET

I N C I D E N T	OFFENSE:				INCIDENT NO.:	2015-16827																								
					CASE NO.:	15-132897																								
	DATE OF OFFENSE: June 5, 2015				TIME:	09:40																								
	LOCATION OF OFFENSE:				COUNTY:	San Miguel																								
<table border="1"> <thead> <tr> <th>PERSON CODE</th> <th>NAME</th> <th>DOB</th> <th>SSN#</th> <th>ADDRESS</th> <th>TELEPHONE</th> </tr> </thead> <tbody> <tr> <td>SUSPECT</td> <td>VIGIL, JOHN P</td> <td>12/08/1963</td> <td>525-11-4746</td> <td>Address Type: HOME ADDRESS Street Address: 512 LUGAR DE LOS CABALLEROS City: LAS VEGAS State: NM Zip: 87701 County: SAN MIGUEL Region: REGION 2 Country: UNITED STATES</td> <td>(505) 454-2100</td> </tr> <tr> <td>REPORTING PERSON</td> <td>CHAVEZ, JOE</td> <td></td> <td></td> <td>Address Type: BUSINESS ADDRESS Road Type: STATE ROAD Street Address: 3695 HOT SPRINGS BLVD, City: LAS VEGAS State: NM Zip: 87701 County: SAN MIGUEL Region: REGION 2 Country: UNITED STATES</td> <td>(505) 718-0166 (505) 454-2100</td> </tr> <tr> <td>REPORTING PERSON</td> <td>TWEED, FRANCES</td> <td></td> <td></td> <td>Address Type: BUSINESS ADDRESS Road Type: STATE ROAD Street Address: 3695 HOT SPRINGS BLVD City: LAS VEGAS State: NM Zip: 87701 County: SAN MIGUEL Region: REGION 2 Country: UNITED STATES</td> <td>(505) 454-2100</td> </tr> </tbody> </table>							PERSON CODE	NAME	DOB	SSN#	ADDRESS	TELEPHONE	SUSPECT	VIGIL, JOHN P	12/08/1963	525-11-4746	Address Type: HOME ADDRESS Street Address: 512 LUGAR DE LOS CABALLEROS City: LAS VEGAS State: NM Zip: 87701 County: SAN MIGUEL Region: REGION 2 Country: UNITED STATES	(505) 454-2100	REPORTING PERSON	CHAVEZ, JOE			Address Type: BUSINESS ADDRESS Road Type: STATE ROAD Street Address: 3695 HOT SPRINGS BLVD, City: LAS VEGAS State: NM Zip: 87701 County: SAN MIGUEL Region: REGION 2 Country: UNITED STATES	(505) 718-0166 (505) 454-2100	REPORTING PERSON	TWEED, FRANCES			Address Type: BUSINESS ADDRESS Road Type: STATE ROAD Street Address: 3695 HOT SPRINGS BLVD City: LAS VEGAS State: NM Zip: 87701 County: SAN MIGUEL Region: REGION 2 Country: UNITED STATES	(505) 454-2100
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A T T A C H M E N T S	ATTACHMENT (A) PHOTOS OF J. VIGIL'S WORK SPACE																													
	ATTACHMENT (B) COPY OF SEARCH WARRANT AND AFFIDAVIT FOR SEARCH WARRANT																													
	ATTACHMENT (C) COPY OF RETURN OF INVENTORY																													
	ATTACHMENT (D) AUDIO RECORDING JOE CHAVEZ AND FRANCES TWEED																													
	ATTACHMENT (E) COPY OF (CAD) REPORT																													
A D M I N	REPORTING OFFICER:	DEPUTY SEAN ARMIJO			CASE STATUS:	CLOSED																								
	COPIES TO:																													

STATE OF NEW MEXICO INCIDENT REPORT						ORI NO. NM0250000		INCIDENT NO. 2015-16827		PRIMARY Y	PAGE 1	OF 4
OCCURRENCE DATE(S)			DATE REPORTED		AGENCY SAN MIGUEL COUNTY SHERIFF'S OFFIC San Miguel							
ON OR BETWEEN					COUNTY							
MM/DD/YYYY		MM/DD/YYYY		MM/DD/YYYY		GEOGR. CODE		OPTIONAL USE (CASE NO., ETC.)		BURGLARY Force No F		NO. OF
06/05/2015		06/05/2015		06/05/2015		02005		15-132897		<input type="checkbox"/>		
TIME	DAY	TIME	DAY	TIME	DAY	HATE / BIAS MOTIVATION						GANG REL Yes No
09:40	FRI	22:27	FRI	09:40	FRI	No Hate/Bias motivation apparent						<input type="checkbox"/> <input checked="" type="checkbox"/>
ADDRESS/LOCATION OF INCIDENT												
PERSON CODE SUSPECT			TYPE CODE INDIVIDUAL			INJURY CODE NONE						
1- NAME (LAST, FIRST, MIDDLE) VIGIL, JOHN P						SOCIAL SECURITY NO. 525-11-4746		DOB 12/08/1963		AGE SEX RACE: WHI BLK ASIA IND UNK 51 M <input checked="" type="checkbox"/>		
OCCUPATION TECH						VICTIM OF OFF. NO.		HEIGHT WEIGHT HAIR EYES		ETHNIC		AGG ASSAULT
						<input type="checkbox"/>		507 190 BRO BRO		H		<input type="checkbox"/>
EMPLOYER / SCHOOL NMBHI						VICT. OF SUSP. NO.		RELATIONSHIP				
GANG AFFILIATION NONE						<input type="checkbox"/>		<input type="checkbox"/>				
ARREST/CITATION NO. F.B.I. NO.			S.I.D. NO.		NCIC NO.		Type of Arrest:		ON VIEW		CITED	CUST.
									<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Address Type: HOME ADDRESS												
Street Address: 512 LUGAR DE LOS CABALLEROS												
City: LAS VEGAS State: NM Zip: 87701												
County: SAN MIGUEL Region: REGION 2 Country: UNITED STATES												
TELEPHONES			Work Phone			505 454 2100						
PERSON CODE REPORTING PERSON			TYPE CODE INDIVIDUAL			INJURY CODE NONE						
2- NAME (LAST, FIRST, MIDDLE) CHAVEZ, JOE						SOCIAL SECURITY NO.		DOB		AGE SEX RACE: WHI BLK ASIA IND UNK M <input checked="" type="checkbox"/>		
OCCUPATION SECURITY SUPERVISOR						VICTIM OF OFF. NO.		HEIGHT WEIGHT HAIR EYES		ETHNIC		AGG ASSAULT
						<input type="checkbox"/>						<input type="checkbox"/>
EMPLOYER / SCHOOL NMBHI						VICT. OF SUSP. NO.		RELATIONSHIP				
GANG AFFILIATION NONE						<input type="checkbox"/>		<input type="checkbox"/>				
ARREST/CITATION NO. F.B.I. NO.			S.I.D. NO.		NCIC NO.		Type of Arrest:		ON VIEW		CITED	CUST.
									<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
Address Type: BUSINESS ADDRESS Road Type: STATE ROAD												
Street Address: 3695 HOT SPRINGS BLVD,												
City: LAS VEGAS State: NM Zip: 87701												
County: SAN MIGUEL Region: REGION 2 Country: UNITED STATES												
TELEPHONES			Home Phone			505 718 0166						
TELEPHONES			Work Phone			505 454 2100						

STATE OF NEW MEXICO INCIDENT REPORT			ORI NO. NM0250000		INCIDENT NO. 2015-16827		PRIMARY Y	PAGE 2	OF 4
PERSON CODE REPORTING PERSON		TYPE CODE INDIVIDUAL		INJURY CODE NONE					
3-NAME (LAST, FIRST, MIDDLE) TWEED, FRANCES			SOCIAL SECURITY NO.		DOB		AGE SEX RACE: WHI BLK ASIA IND UNK F X		
OCCUPATION EXECUTIVE NURSE ADMINISTRATOR			VICTIM OF OFF. NC		HEIGHT WEIGHT HAIR EYES		ETHNIC		AGG ASSAULT
EMPLOYER / SCHOOL NMBHI			VICT. OF SUSP. NO		RELATIONSHIP				
GANG AFFILIATION NONE									
ARREST/CITATION NO. F.B.I. NO		S.I.D. NO.		NCIC NO.		Type of Arrest: ON VIEW CITED CUST.		Residential Status: RES NON X	
Address Type: BUSINESS ADDRESS Road Type: STATE ROAD Street Address: 3695 HOT SPRINGS BLVD City: LAS VEGAS State: NM Zip: 87701 County: SAN MIGUEL Region: REGION 2 Country: UNITED STATES									
TELEPHONES		Work Phone		505 454 2100					
M.O. EVENT CODES : (AGENCY OPTIONAL USE)							TOTAL VALUE STOLEN		TOTAL VALUE REC.
SYNOPSIS On June 5th, 2015 at approximately 10:00 a.m. I was dispatched to 3695 Hot Springs Blvd. (New Mexico Behavioral Health Institute) in reference to possible larceny of narcotics.									

STATE OF NEW MEXICO INCIDENT REPORT	ORI NO. NM0250000	INCIDENT NO. 2015-16827	PRIMARY Y	PAGE 3	OF 4
<p>NARRATIVE</p> <p>ASSIGNMENT: On June 5th, 2015 at approximately 10:00 a.m. I was dispatched to 3695 Hot Springs Blvd. (New Mexico Behavioral Health Institute) in reference to possible larceny of narcotics.</p> <p>INVESTIGATION: Upon my arrival on scene, I made contact with Security Supervisor, Joe Chavez, who advised me that Frances Tweed had received an anonymous letter stating an NMBHI employee was stealing medication and money from patients currently being treated at NMBHI. Ms. Tweed is the executive nurse administrator for NMBHI. Ms. Tweed provided me with a copy of the anonymous letter. The letter alleged that Psych Tech Supervisor, John Vigil, had money and prescription narcotics belonging to various patients at NMBHI, locked inside of his desk.</p> <p>STATEMENT: (JOE CHAVEZ AND FRANCES TWEED) Mr. Chavez, prior to my arrival, made entry into J. Vigil's office and cut the padlock on his desk. Mr. Chavez then directed me to J. Vigil's office. Inside of J. Vigil's office I observed J. Vigil's wooden work desk which was located on the south side of the office. Mr. Chavez who had previously cut the padlock on the top part of the desk's compartment, had replaced it with a lock of his own, in which only he had a key to. Mr. Chavez unlocked the lock and opened the upper compartment of J. Vigil's desk. In plain view, I observed approximately four unidentified prescription pill bottles, a small cup containing an unidentified prescription pill, and approximately four sealed (Southwest Capital Bank) money envelopes. At this point I advised Mr. Chavez to seal the desk and I left J. Vigil's Office.</p> <p>Mr. Chavez then provided me photos that he initially took when he cut the padlock to the desk. After reviewing the photos which he burned to a disk, I observed multiple sealed (Southwest Capital Bank) money envelopes along with more possible prescription medication in one of the drawers to J. Vigil's desk. I was advised by Ms. Tweed, the pill inside of the small container was possibly Ativan. Ms. Tweed stated she had researched the pill's descriptors and found it to be Ativan. Upon information and belief, Ativan is a scheduled narcotic.</p> <p>(FOR EXACT WORDING REFER TO ATTACHMENT (D) AUDIO RECORDING JOE CHAVEZ AND FRANCES TWEED)</p> <p>DISPOSITION: Upon information from BHI Director Troy Jones, Mr. Vigil has authority to assist in the distribution of medication to patients, however he does not have authority to possess the drugs. I contacted Under Sheriff Anthony Madrid after gathering all information and a search warrant was placed for Mr. Vigil's work space. Under Sheriff Madrid and I took photos of the items retrieved from Mr. Vigil's work space.</p> <p>(REFER TO ATTACHMENT (A) FOR PHOTOS OF J. VIGIL'S WORK SPACE)</p> <p>(FOR MORE INFORMATION ON THIS CASE SEE UNDER SHERIFF ANTHONY MADRID'S SUPPLEMENTAL REPORT)</p> <p>(SEE ATTACHMENT (B) SEARCH WARRANT AND AFFIDAVIT FOR SEARCH WARRANT)</p> <p>(SEE ATTACHMENT (C) RETURN OF INVENTORY)</p>					

STATE OF NEW MEXICO INCIDENT REPORT		ORI NO. NM0250000	INCIDENT NO. 2015-16827	PRIMARY Y	PAGE 4	OF 4
"I WILL PROSECUTE / TESTIFY SHOULD THE OFFENDER" <input checked="" type="checkbox"/> Y <input type="checkbox"/> N		"I UNDERSTAND IT IS A CRIMINAL COMPLAINTANT / VICTIM OFFENSE TO FILE A FALSE REPORT TO POLICE." <input checked="" type="checkbox"/> X			DATE	
REPORTING OFFICER SEAN ARMIJO <i>Sean Armijo</i>		RANK DEPUTY	I.D. NO SM-4	DATE 08/24/2015		
ASSISTING OFFICER						
APPROVING OFFICER ANTHONY MADRID <i>Anthony Madrid</i>		UNDER SHERIFF	SM-2	8/24/15		
DETECTIVE / FOLLOW-UP OFFICER / REFERRED TO						
PROCESSED BY	DATE	DATA ENTRY PERSON SCARMIGO		DATE 08/24/2015		
INCIDENT STATUS CLOSED	C.I.A. <input type="checkbox"/> C.I.E. <input type="checkbox"/>	EXCEPTIONAL CLEARANCE CODE		DATE 05/06/2015		
AGENCY OPTIONAL USE (DISTRIBUTION, OTHER OFFICERS, ETC.)			CASES CLEARED BY THIS ARREST			
			Case No.	Case No.	Case No.	